

Appl. No. 10/783,649
Amdt. Dated October 14, 2009
Reply to Final Office Action of April 14, 2009

REMARKS/ARGUMENTS

Claims 1-16 were pending in this application.

Claims 1-16 stand rejected under 35 U.S.C. 103(a) as being unpatentable over Engleson et al. US 7,117,041 in view of Eggers et al. US2006/0106649 and further in view of Bourget US 6,647,299. This rejection is respectfully traversed for the reasons that follow.

System claims 1-11 and 13-14 have been cancelled, making their rejection moot. Method claims 12, 15 and 16 have been amended to better distinguish them from the prior art. These amendments are believed to be supported by FIGS. 17 and 18, as well as paragraphs [0105]-[0110] of the original specification as published.

Independent method claim 12 now clearly recites that the audio alarm is emitted from a portable, movable, reusable medical device itself at its then current and specific location. This particular general to specific location tracking method claimed is not shown or suggested by the prior art. As the Examiner admits, Engleson et al. do not explicitly teach use of the device access point to the network for determining location. The Examiner relies on Eggers et al. for teaching concerning reporting the last access node used by the medical device and determining its location within the network on that basis. However, because medical devices are portable, movable and reusable and patients are movable with or without devices connected to them, the location within the network only translates into or provides an indication of the last known general location of the medical device. Furthermore, because of the mobility of patients and medical device and the fact that the last access point used by the medical device may be located in a room, a nearby room or hallway, a floor above or a floor below the room, the last known general location data is extremely unreliable. The Examiner relies on Bourget for teaching that it is allegedly well known to employ an audio signal or alarm to assist in locating a medical device, specifically to locate a device during telemetric transfer of data. Applicants respectfully disagree. The teaching of Bourget relates to the relative positioning of an implanted medical device and an external programming unit, which must be closely positioned for telemetric communication to be successful. The present invention uses communication node based general location in combination with a remotely activated, locally emitted audible alarm to locate a medical device with better granularity rather than an audible signal to verify the positioning two related devices.

Based on the foregoing, claim 12 is believed to be patentable over the prior art.

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Claims 15 and 16 depend from claim 12 and at least derive their patentability therefrom.

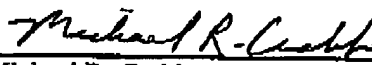
A Petition for Extension of Time by three (3) months from July 14, 2009 to October 14, 2009 is submitted herewith along with the authorization for payment of the appropriate fees. No further extensions or fees are believed to be due in connection with this paper. However, the Commissioner is authorized to consider this a request for any necessary extension and charge our Deposit Account, 50-3118 for any additional fees (or credit any over payments) in association with this communication.

A timely and favorable response on the merits of the claims as amended is respectfully requested.

Respectfully submitted,
Geoffrey N. Holland, et al.

41155 Customer No.

Hospira, Inc
Telephone: (224) 212-2889
Facsimile: (224) 212-2088


Michael R. Crabb
Registration No. 37,298
Attorney for Applicants